

Director
Nebraska Department of Motor Vehicles
Lincoln, NE 68509

Dear Director:

As provided for in section 60-407, Revised Statutes Supplement, I do hereby request that _____ of _____, Nebraska, operator's license number _____, and date of birth _____ be recalled for examination, for in my opinion, he or she is not capable of operating a motor vehicle safely over the highways of the State of Nebraska for the following reasons: (please give a detailed explanation of the reasons for the recall request)

Officer Name and Number: _____

Officer Signature

Date

Chief of Police Signature

Date

Lincoln Police Department